16534

Atty. Dkt. No. 018792/0180

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Hossein A. GHANBARI et al.

Title:

COMPOSITIONS CONTAINING

BACTERIOPHAGES AND

METHOD OF USING

BACTERIOPHAGES TO TREAT

INFECTIONS

Appl. No.:

09/583,738

Filing Date:

5/31/2000

Examiner:

Unassigned

Art Unit:

1653

AMENDMENT TRANSMITTAL

Commissioner for Patents Washington, D.C. 20231

Sir:

Transmitted herewith is Amendment A in the above-identified application.

- [X] Small Entity status under 37 C.F.R. § 1.9 and § 1.27 has been established by a Small Entity statement previously submitted.
- [] Small Entity statement is enclosed.
- [X] The fee required for additional claims is calculated below:

	Claims as Amended		Previously Paid For		Extra Claims Present		Rate		Additional Claims Fee
Total Claims:	28		20	=	8	х	\$18.00	=	\$144.00
Independents:	2	_	3	=	0	x	\$80.00	=	\$0.00
First presentation	on of any M	ultipl	e Dependent	t Cla	ims:	_ +	\$270.00	=	\$0.00
	CLAIMS FEE TOTAL:					=	\$144.00		

[] Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

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TECH CENTER 1600/2900

\$0.00	\$110.00	Extension for response filed within the first month:	[]			
\$0.00	\$390.00	Extension for response filed within the second month:	[]			
\$0.00	\$890.00	Extension for response filed within the third month:	[]			
\$0.00	\$1,390.00	Extension for response filed within the fourth month:	[]			
\$0.00	\$1,890.00	Extension for response filed within the fifth month:	[]			
\$0.00	N FEE TOTAL:	EXTENSION FEE TOTAL:				
\$144.00	CLAIMS AND EXTENSION FEE TOTAL:					
\$72.00	Small Entity Fees Apply (subtract ½ of above):					
\$72.00	TOTAL FEE:					

- [] Please charge Deposit Account No. 19-0741 in the amount of \$72.00. A duplicate copy of this transmittal is enclosed.
- [X] A check in the amount of \$72.00 is enclosed.
- [X] The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date January 10, 2001

FOLEY & LARDNER
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Michele M. Simkin Attorney for Applicant Registration No. 34,717